

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 09/465,429
APPLICANT(S)

FILED DATE

CLAIMS

3-31-04

	AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP
1				
2				
3				
4				
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21				
22	1	1		
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49				
50				
TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				

3-31-04

	AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		AFTER 3RD AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51	1					
52		1				
53		1				
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95						
96						
97						
98						
99						
100						
TOTAL IND.	2					
TOTAL DEP.	9					
TOTAL CLAIMS	11					